PART B - FEE(S) TRANSMITTAL

(JUN	this form, together w	ith applicable f	or <u>Fax</u>	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	inia 22313-1450	
INSTRUCTIONS: Wais form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence address as indicated unless correspondence below or structed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification of maintenance fee notifications are provided to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications are provided to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications are provided to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications are provided to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications are provided to the current correspondence address as indicated unless correspondence address.						
CURRENT CORRESPONDENC	22 ADDRESS (Note: Use Block 1 for 190 03/22/2006 SS P.C. Y, SUITE 1200		,	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
06/19/2006 WABDD Sale Ref: 000000 01 FC:1501 02 FC:8001	1400.00 DA	10786221 86221		Christine J Christine J 6 14 06	acquet	(Depositor's name) (Signature) (Date)
APPLICATION NO.	3.00 BA FILING DATE	FIRST NAMED INVE		ITOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/786,221 TITLE OF INVENTION: C	02/24/2004 ALL DURATION ALERT		Daryl U. Lang		4366-147	3034
APPLN, TYPE	SMALL ENTITY	ISSUE FEI	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	06/22/2006
EXAMINER		ART UNI	r c	LASS-SUBCLASS		
SMITH, CREIGHTON H 264				379-265060		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Fee Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Avaya Technology Corp. Basking Ridge, NJ						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖰 Corporation or other private group entity 🚨 Government						
Publication Fee (No small entity discount permitted)				(s): ne amount of the fee(s) is enclosed. credit card. Form PTO-2038 is attached. is hereby authorized by charge the required fee(s), or credit any overpayment, to ount Number 0-1602 (enclose an extra copy of this form).		
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Authorized Signature	Nouglas	Swart	<u> </u>	Date Ju	ne 14, 2006	
Typed or printed name _	Douglas W. Swar	rtz		Registration N	lo. <u>37,739</u>	
an application. Confidential submitting the completed a this form and/or suggestions Box 1450, Alexandria, Virg Alexandria, Virginia 22313-	ity is governed by 35 U.S.C. plication form to the USPTC for reducing this burden, shinia 22313-1450. DO NOT \$ 1450.	122 and 37 CFR 1. D. Time will vary dould be sent to the CEND FEES OR CO	14. This collection epending upon the Chief Information C OMPLETED FORM	is estimated to take 12 r individual case. Any co officer, U.S. Patent and IS TO THIS ADDRESS	the public which is to file (anninutes to complete, includir mments on the amount of tight and the control of the control of the control of the control of the public of the control of the public of	ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,